

**Minutes of the Trust Board in Public Meeting of Weston Area Health NHS Trust held on  
Tuesday 12 June 2012 at 11.00 am in the Board Room, Weston General Hospital**

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**Present:**

Mr Chris Creswick	Chairman (V)
Mr Peter Colclough	Chief Executive (V)
Ms Jude Ferguson	Non Executive Director (V)
Mr Roger Lloyd	Non Executive Director (V)
Mr Grahame Paine	Non Executive Director (V)
Dr George Reah	Non Executive Director (V)
Mr Nick Gallegos	Medical Director (V)
Mrs Irene Gray	Director of Nursing (V)
Mrs Alison Kingscott	Director of Human Resources
Mr Rob Little	Director of Finance (V)
Mrs Andrea Hunt	Trust Board Secretary

(V) denotes Voting Director

**In Attendance:**

Mr David Craig	Performance and Improvement Manager
Mrs Julie Fisher	Executive Personal Assistant (Minute-Taker)
Mrs Delyth-Lloyd Evans	Chair, North Somerset Community Partnership
Mrs Caroline Welch	Head of Communications

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**748.12 WELCOME AND APOLOGIES**

Mr Creswick, Chairman, noted the following apologies for absence:

Mr Stephen Buswell	North Somerset LINk
Dr Paul Phillips	Principal, Weston College
Mr Alan Richardson	Crossroads Care
Mr Ian Turner	Non Executive Director
Mr Nick Wood	Chief Operating Officer (V)
Dr Patricia Woodhead	Director of Quality and Patient Safety

Mr Creswick welcomed Mr Craig and Mrs Lloyd-Evans to the Public Meeting of the Weston Area Health NHS Trust Board.

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## DECLARATION OF BOARD MEMBERS' INTEREST

There were no declarations of interest.

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### 749.12 CONSENT AGENDA

#### Minutes and Matters Arising from the Meeting held on Tuesday 1 May 2012

The Minutes of the meeting held on Tuesday 1 May 2012 were agreed as a correct record subject to one amendment on Page 7 'Section 4 – Finance Report' – the 3<sup>rd</sup> bullet point should read:

"The Draft Annual Accounts were submitted to the External Auditors on 23 April 2012, and the audited Annual Accounts will be approved at the Trust Board Meeting on Wednesday 6 June 2012".

**Resolution:**

The Minutes of the May Board in Public Meeting were **APPROVED** as a true and accurate record of the meeting, subject to the one amendment as stated above.

The Table of Matters Arising following the meeting held on Tuesday 1 May 2012 had been reviewed with the progress and completion data duly updated.

'Draft' Minutes of the Extraordinary Trust Board Meeting held on Wednesday 6 June 2012 were tabled, with Mr Creswick seeking the Board's approval of these. The Minutes were agreed as a correct record subject to one amendment on Page 2 – the 7<sup>th</sup> paragraph should read:

"Mr Turner *had obtained* confirmation from Mr Little that the content of the letter of management representation was correct.

**Resolution:**

The Minutes of the Extraordinary Trust Board in Public Meeting held on 6 June 2012 were **APPROVED** as a true and accurate record of the meeting, subject to the one amendment as stated above.

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## 750.12 CONSENT AGENDA

### Medical Revalidation

#### **Resolution:**

The Board **SUPPORTS** the Medical Director in his plans to implement the Medical Revalidation Policy and Action Plan, and in particular establishment of a Responsible Officer, Trained Appraisers, Governance Structure, A System of Funding and Administration, and Clinical Information Systems.

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## 751.12 CONSENT AGENDA

### Corporate Governance Framework Terms of Reference

#### **Action:**

Formal discussion to take place in relation to the Terms of Reference of a 'Finance and Performance Committee'.

#### **By:**

Trust Board Secretary / Chair of the Finance Committee

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## 752.12 CHIEF EXECUTIVE'S REPORT

Mr Colclough presented his Chief Executive's Report, and was delighted to report that the Trust has again been successful in achieving one of the CHKS Top 40 Hospitals Awards, which he said was a good reflection on the overall quality of the work we do.

Mr Colclough provided a further update in respect of the Academic Health Science Network, confirming that four/five Networks have been successfully established and this has now been extended across the country. Mr Colclough added that we should continue to remain enthusiastic participants, with which Mr Creswick concurred.

#### **Resolution:**

The Trust Board **NOTED** the Chief Executive's Report

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## 753.12 INTEGRATED PERFORMANCE REPORT

Mr Creswick introduced the Integrated Performance Report (IPR) noting that this is the first report presented in the revised format following a meeting held

between the Executive Directors Leads, Trust Board Secretary, Mr Paine and Dr Reah, whom he thanked for their work in developing the IPR.

An errata schedule was presented by the Trust Board Secretary which summarised some presentational corrections and items for further discussion in the body of the report which had been received from Dr George Reah. Mr Creswick confirmed that the revised report would be reviewed in three months at which time further proposals for revision of the content and format of the report would be considered by the Board.

### **Section 1 - Executive Summary**

Mr Colclough led the discussions on the Executive Summary of the IPR and highlighted the Trust's strong performance for the start of the financial year whilst providing the following overview:

- There has been a significant improvement in the Emergency Department performance in April.
- The Trust achieved the 4 hour maximum wait in the Emergency Department with 97.4% against a target of 95%. This performance ranked the Trust 7<sup>th</sup> out of 32 Trusts for the South of England.
- The Trust met the target 95<sup>th</sup> percentile of times from arrival at ED to admission, transfer or discharge with a time of 3 hours and 59 minutes.
- Median time spent from arrival at ED to treatment was 51 minutes.
- Emergency Department attendances remained high and above contract and the level of acuity of patients stayed at the same level.
- The Trust achieved the Stroke target in April with 90.9% against a target of 80% and this was the Trust's highest performance for the past 13 months.
- The Trust achieved all but one of the National RTT targets in April 2012 and all but one of the Cancer targets in March 2012.
- The RTT target that was not achieved was for admitted 95<sup>th</sup> percentile. This is due to work being undertaken by the Planned Care Division to reduce the longest waiters and the overall wait.
- The Cancer target that was not achieved was the 31 day for second or subsequent cancer treatment surgery with 90% against a target of 94%. The Trust underachieved against this target due to the low numbers of patients and also patient choice.

Mrs Lloyd-Evans commented that the revised format of the IPR is much improved from the earlier versions presented to the Board and provides a good overview of key areas of performance.

In response to the summary of the Trust's performance in April 2012, Mrs Lloyd-Evans requested that the Trust works with its partners in the community to focus on breastfeeding, pressure ulcers and discharges. Mrs Lloyd-Evans also questioned what the Trust was doing to share information and performance data with the GPs in the local community. Mr Gallegos informed the Board that a monthly newsletter is issued to GPs and agreed to add Mrs Lloyd-Evans and Ms Penny Brown to the distribution list. Mr Gallegos also confirmed that there will be a password protection site for GPs on the Trust's revised web site which will be launched at the end of June 2012.

**Action:**

To add Mrs Lloyd-Evans and Ms Penny Brown to the distribution list of the GP newsletter.

**By:**

Medical Director / Head of Communications

## **Section 2 - Quality and Patient Safety**

Mrs Gray introduced the Quality and Patient Safety section of the report.

April's figure for staff related incidents are 33. The two most reported types of incidents relate to violence and abuse and accidents such as trips and falls. Mrs Gray reassured the Board that the injuries are of a minor nature.

Mrs Gray reported that there were two Serious Untoward incidents in April 2012, one was a Grade Four pressure ulcer in the Planned Care Division and the other was a patient who experienced scalding from a hot drink in the Emergency Division. Mrs Gray confirmed that lessons are being learnt from all incidents with a view to improve future practice.

It was agreed that the table on Yearly Comparison for SUI Causes under Section 2.3.2 would be removed in future versions of the IPR as the table does not add value.

Mrs Gray informed the Board that the Table for 2.3.3 (Pressure Ulcers) was presented incorrectly in the report as although the data is correct, the colour referencing is presented the wrong way around. An updated table was presented to the Board. Mrs Gray informed the Board that a joint piece of work is required on Pressure Ulcers between Weston Area Health NHS and North Somerset Community Partnership. A report on Pressure Ulcers is being led by Mrs Perry for presentation to the Nursing and Midwifery Committee.

Dr Reah noted that the text under the table on Complaint Response Times, in Section 2.4.1, relates to last month's data. Mrs Gray confirmed that this will be corrected in next month's report.

**Action:**

Text under the table on Complaint Response Times, in Section 2.4.1, to be corrected for the July Integrated Performance Report.

**By:**

Director of Nursing

Mrs Gray reported on the CQUIN targets for 2011/12 summarising the targets that had been achieved and the targets that had not been met. Mrs Gray informed the Board that a Compliance and Assurance Framework is being developed for meeting the CQUIN targets for 2012/13.

Dr Reah noted that under the CQUIN targets not met in 2011/12, the fourth bullet point should read "Increase the number of discharges over 7 days by 12% on last year's performance".

The monitoring systems around Infection Control are in the process of being revised by Chris Perry, Associate Director of Nursing. A more effective and robust monitoring tool is being sought for hand hygiene compliance. Mrs Gray also reported one case of hospital attributed Clostridium Difficile.

Mrs Gray informed the Board that actions are currently in place to achieve a higher compliance on breast feeding in hospital and that these include continued awareness and training for all maternity staff. Mrs Gray also confirmed that she will work jointly on the breast feeding initiative with Ms Penny Smith from North Somerset Community Partnership.

Finally, Mrs Gray referred to the recent Care Quality Commission visit to review the Trust's compliance with the Termination of Pregnancy Guidelines. The Trust was confirmed as being fully compliant with Outcome 21 as a result of immediate action taken at the time of the visit.

### **Section 3 - Operational Performance**

Mr Paine referred to his previous requests in respect of more detailed reporting around Theatre Activity.

Mr Craig informed the Board that the Trust is having issues with the usage of the Opera Theatre Software and is unable to provide data currently. This request will be prioritised as soon as the data becomes available.

**Action:**

Integrated Performance Report to incorporate reporting on Theatre Activity

once data is available.

**By:**

Chief Operating Officer

## **Finance Report**

Mr Little presented the Finance Report for Month 1 and reported an encouraging start to the year with the key headlines as presented within the report.

- The Trust is reporting a year to-date surplus of £111k which is in line with the plan.
- Overall income is £3k above plan at the end of April and overall expenditure is £3k over plan at the end of April.
- The Trust's current forecast expenditure and income position should enable delivery of the agreed plan for the year.
- The Trust's Service Improvement Programme (SIP) delivered a disappointing £77k in April against a target of £375k.

Mr Creswick expressed concern with the Trust being behind plan on savings and questioned how critical the financial results for the year to-date will be for the Integrated Care Organisation's (ICO) plans. Mr Colclough confirmed that the Trust's results at the end of Quarter One will be critical as part of the Strategic Health Authority's assessment of the ICO's Integrated Business Plan.

Mr Little confirmed that weekly meetings are being held with Newton Europe and that the Savings Plans will be discussed in detail at the next meeting of the Finance Committee being held on 24 July 2012.

**Action:**

Savings Plan and actual results to be discussed in detail at the next Finance Committee Meeting.

**By:**

Director of Finance / Chief Operating Officer

## **Human Resources**

Mrs Kingscott introduced the Human Resources section of the report and confirmed that a detailed report on workforce will be presented to the Trust Board in August 2012.

Mrs Kingscott outlined the key headlines as presented within the report:

- The month's sickness rate has improved and is down to 3.11%
- The appraisal rate has decreased to 80.18% for the rolling year to-date. Plans are in place to increase the appraisal rate and to ensure this is maintained throughout the year.
- Training compliance has reduced to 67.49%, this is due to the change in frequency of fire training, which is now required to be undertaken every year.

Mrs Kingscott confirmed that a change in behaviour and culture is required throughout the Trust to improve the statistics around statutory and mandatory training.

Mrs Kingscott also made reference to the BMA day of action on 21 June 2012 and assured the Board that the Executive Management Group is working with the clinical and operational staff to manage the day.

**Resolution:**

The Trust Board **NOTED** the Integrated Performance Report.

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**754.12                    QUALITY ACCOUNT**

Mrs Gray presented the final version of the Quality Account for 2011/12 which had been tabled at the meeting. Mrs Gray also tabled the statement from NHS Bristol, North Somerset and South Gloucester Primary Care Trust which had just been received. The statement will be included in the Quality Account which will be finalised today.

**Resolution:**

The Trust Board **APPROVED** the Quality Account.

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**755.12                    BOARD COMMITTEES' EXCEPTION REPORTS**

**Audit and Assurance Committee Annual Report**

The Annual Report of the Audit and Assurance Committee for 2011/12 was tabled for information.

Mr Creswick, on behalf of the Board, expressed his thanks and appreciation to Mr Turner, Mr Little and other members of the Audit and Assurance Committee for their hard work and achievement for the 2011/12 financial year.

## **Remuneration Committee**

Mr Creswick referred to the proposal discussed at the Remuneration and Terms of Service Committee held on 17 April 2012 in which the Chief Executive proposed that Ms Bishop is replaced as a voting member by Mr Wood. This was in a consequence of Ms Bishop's role as Programme Director of the Integration Programme and Mr Wood's key operational role in the Trust.

The Remuneration and Terms of Service Committee approved the voting Executive Directors of the Trust Board as Mr Colclough – Chief Executive, Mr Little - Director of Finance, Mrs Gray - Director of Nursing, Mr Gallegos - Medical Director and Mr Wood – Chief Operating Officer. The Remuneration Committee had approved the proposal subject to ratification by the Trust Board.

### **Resolution:**

The Trust Board **RATIFIED** the proposal that Ms Bishop is replaced as a voting member by Mr Wood.

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## **756.12 ANY OTHER BUSINESS**

There was no any other business declared.

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## **757.12 DATE OF NEXT TRUST BOARD MEETING:**

Tuesday 3 July 2012 at 11.00 am in the Board Room

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The **Trust Board in Public Meeting** closed at 12.40 pm